



02-07-01

02-07-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
CONTINUED PROSECUTION APPLICATION (CPA) TRANSMITTAL
UNDER 37 CFR 1.53(d)

RECEIVED

FEB 08 2001
Technology Center 2600

Address to:	Attorney Docket No.	SA9-97-115
Box CPA	Inventor(s)	F. Lee et al.
Assistant Commissioner for Patents	Express Mail Label No.	EL367500430US
Washington, DC 20231	Total Pages	22

This is a request for a X Continuation or Divisional application under 37 CFR 1.53(d), continued prosecution application of prior application Serial No. 09/219,195, filed on 12/21/98, entitled: AN INTERCONNECT MODULE FOR USE IN A SUSPENSION ASSEMBLY

Title: **AN INTERCONNECT MODULE FOR USE IN A SUSPENSION ASSEMBLY**

NOTE: The filing of this CPA is a request to expressly abandon the prior application as of the filing date of the request for a CPA.

1. Enter the unentered amendment previously filed on xx/xx/xx under 37 CFR 1.116 in the prior nonprovisional application.
2. A preliminary amendment is enclosed.
3. This application is filed by fewer than all the inventors named in the prior application, 37 CFR 1.53(d)(4). **Delete** the following inventor(s) named in the prior nonprovisional application:

4. A new power of attorney is enclosed. 02/08/2001 GTEFFERA 00000086 090466 09219195
5. X Information Disclosure Statement (IDS) is enclosed. 01 FC:131 710.00 CH
02 FC:103 72.00 CH
03 FC:102 320.00 CH
6. **Fee Calculation**

	Claims Filed		Extra	Rate	Fees
Basic Fee					\$710.00
Total Claims	24	-20 =	4	x \$ 18.00	\$72.00
Independent Claims	7	-3 =	4	x \$ 80.00	\$320.00
Multiple Dependent Claim				\$270.00	
				TOTAL	\$1,102.00

7. X Please charge my Deposit Account No. 09-0466 in the amount of \$1,102.00.
A duplicate copy of this sheet is attached.
8. X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 09-0466. A duplicate copy of this sheet is attached.
X Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
X Any patent application processing fees under 37 CFR 1.17.

EXPRESS MAIL CERTIFICATE

I hereby certify that the above paper/fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated below and is addressed to the Assistant Commissioner for Patents, Washington, DC 20231

Date of Deposit: February 5, 2001

Person mailing paper/fee: Rosalind Kennison

Signature Rosalind Kennison

Respectfully submitted,

Abby Reissinia
Abby Reissinia (#38,686)
Attorney for Applicants
IBM Corporation
5600 Cottle Road, L2PA/014-2
San Jose, CA 95193
Telephone (408) 256-2062

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY
TYPE ☐

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	24 minus 20 = *	4
INDEPENDENT CLAIMS	7 minus 3 = *	4
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEE
TOTAL	

RATE	FEE
	710
80	320
18	72
TOTAL	pd

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total *	Minus **	=
	Independent *	Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		

RATE	ADDITIONAL FEE
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total *	Minus **	=
	Independent *	Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		

RATE	ADDITIONAL FEE
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total *	Minus **	=
	Independent *	Minus ***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		

RATE	ADDITIONAL FEE
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.